

United States Bankruptcy Court
Northern District of Illinois
Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle):
Midwest Surgical, LLC

Name of Joint Debtor (Spouse) (Last, First, Middle):

All Other Names used by the Debtor in the last 6 years
(Include married, maiden, and trade names):

All Other Names used by the Joint Debtor in the last 6 years
(Include married, maiden, and trade names):

Soc. Sec./Tax I.D. No. (if more than one, state all):
01-0675433

Soc. Sec./Tax I.D. No. (if more than one, state all):

Street Address of Debtor (No. & Street, City, State, & Zip Code):
2801 S. Finley Road
Downers Grove, IL 60515

Street Address of Joint Debtor (No. & Street, City, State, & Zip Code):

County of Residence or of the
Principal Place of Business: Du Page

County of Residence or of the
Principal Place of Business:

Mailing Address of Debtor (if different from street address):

Mailing Address of Joint Debtor (if different from street address):

Location of Principal Assets of Business Debtor (If different from street address above):

Information Regarding the Debtor (Check the Applicable Boxes)
Venue (Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

Type of Debtor (Check all boxes that apply)

- ☐ Individual(s) ☐ Railroad
- ☐ Corporation ☐ Stockbroker
- ☐ Partnership ☐ Commodity Broker
- ☒ Other Limited Liability Company

Chapter or Section of Bankruptcy Code under Which the Petition is Filed (Check one box)

- ☐ Chapter 7 ☒ Chapter 11 ☐ Chapter 13
- ☐ Chapter 9 ☐ Chapter 12
- ☐ Sec. 304 - Case ancillary to foreign proceeding

Nature of Debts (Check one box)

- ☐ Consumer/Non-Business ☒ Business

Filing Fee (Check one box)

- ☒ Full Filing Fee attached
- ☐ Filing Fee to be paid in installments (Applicable to individuals only.)
Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.

Chapter 11 Small Business (Check all boxes that apply)

- ☐ Debtor is a small business as defined in 11 U.S.C. § 101
- ☐ Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)

Statistical/Administrative Information (Estimates only)

- ☒ Debtor estimates that funds will be available for distribution to unsecured creditors.
- ☐ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

| Estimated Number of Creditors | 1-15 | 16-49 | 50-99 | 100-199 | 200-999 | 1000-over |
|-------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Estimated Assets

| \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | More than \$100 million |
|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|------------------------------|-------------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Estimated Debts

| \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | More than \$100 million |
|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|------------------------------|-------------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

THIS SPACE IS FOR COURT USE ONLY

Official Form 1) (9/97)

| | | | | |
|---|--|---|--|------------------------|
| Voluntary Petition <i>(This page must be completed and filed in every case)</i> | | Name of Debtor(s): Midwest Surgical, LLC | | FORM B1, Page 2 |
| Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet) | | | | |
| Location Where Filed: - None - | | Case Number: | | Date Filed: |
| Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) | | | | |
| Name of Debtor: See Attached Exhibit 1 | | Case Number: | | Date Filed: |
| District: Northern District of Illinois, Eastern Division | | Relationship: Affiliate | | Judge: |
| Signatures | | | | |
| Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | |
| X _____ Signature of Debtor | | X /s/ Richard Meyer _____ Signature of Authorized Individual | | |
| X _____ Signature of Joint Debtor | | Richard Meyer _____ Printed Name of Authorized Individual | | |
| _____ Telephone Number (If not represented by attorney) | | CFO _____ Title of Authorized Individual | | |
| _____ Date | | _____ Date | | |
| Signature of Attorney X/s/ Geoffrey S. Goodman _____ Signature of Attorney for Debtor(s) Edward J. Green / Geoffrey S. Goodman _____ Printed Name of Attorney for Debtor(s) Foley & Lardner LLP _____ Firm Name 321 North Clark Street Suite 2800 Chicago, IL 60610 Address (312) 832-4500 _____ Telephone Number Date April 22, 2005 | | Signature of Non-Attorney Petition Preparer I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document. Printed Name of Bankruptcy Petition Preparer Social Security Number Address Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document: | | |
| Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities and Exchange Act of 1934 and is requesting relief under chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition. | | If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. X _____ Signature of Bankruptcy Petition Preparer | | |
| Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. | | _____ Date A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. | | |
| X _____ Signature of Attorney for Debtor(s) | | _____ Date | | |

EXHIBIT 1

Weight Intervention and Surgical Healthcare Holding, LLC
Weight Intervention and Surgical Healthcare Center No. 3, LLC
Weight Intervention and Surgical Healthcare Center No. 4, LLC
Weight Intervention and Surgical Healthcare Center No. 5, PLLC
WISH Center No. 6, LLC
WISH Center No. 7, PLLC
WISH Center No. 8, PLLC
WISH Center No. 9, LLC
WISH Center No. 10, PLLC
WISH Center No. 103, LLC f/k/a Weight Intervention and Surgical Healthcare Center No. 2, LLC
WISH Products, LLC
Midwest Trauma, LLC
Midwest Surgical, LLC
Midwest Surgical Real Estate Holdings, LLC